

41

08-23-04

2123/AS

## AMENDMENT TRANSMITTAL LETTER

Docket No.  
06727/000H560-US0Application No.  
09/605,334-Conf. #3652Filing Date  
June 27, 2000Examiner  
T. H. StevensArt Unit  
2123

Applicant(s): Daniel Geist et al.

Invention: IDENTIFICATION OF MISSING PROPERTIES IN MODEL CHECKING

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AUG 27 2004

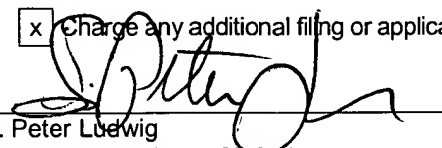
## TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

Technology Center 2100

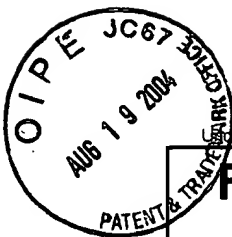
The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	32	- 32 =		x	0.00
Independent Claims	6	- 6 =		x	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00

☒ Large Entity☐ Small Entity☒ No additional fee is required for this amendment.☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_.  
A duplicate copy of this sheet is enclosed.☐ A check in the amount of \$ \_\_\_\_\_ to cover the filing fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge and credit Deposit Account No. 04-0100  
as described below. A duplicate copy of this sheet is enclosed.☒ Credit any overpayment.☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.  
S. Peter Ludwig  
Attorney Reg. No.: 25,351Dated: August 19, 2004DARBY & DARBY P.C.  
P.O. Box 5257  
New York, New York 10150-5257  
(212) 527-7770

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FEE TRANSMITTAL for FY 2004		Complete if Known	
Effective 10/01/2003. Patent fees are subject to annual revision.		Application Number	09/605,334
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	June 27, 2000
TOTAL AMOUNT OF PAYMENT (\$)		First Named Inventor	GEIST, Daniel et al.
180.00		Examiner Name	Stevens, Thomas H.
		Art Unit	2123
		Attorney Docket No.	06727/000H560-US
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)	
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES	
<input type="checkbox"/> Deposit Account: Deposit Account Number: 04-0100 Deposit Account Name: Darby & Darby P.C.		Large Entity Small Entity	
The Director is authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		Fee Code Fee (\$) Fee Code Fee (\$) Fee Description Fee Paid	
FEE CALCULATION		1051 130 2051 65 Surcharge - late filing fee or oath	
1. BASIC FILING FEE		1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet.	
Large Entity Small Entity		1053 130 1053 130 Non-English specification	
Fee Code Fee (\$)	Fee Code Fee (\$)	1812 2,520 1812 2,520 For filing a request for ex parte reexamination	
1001 770 2001 385	Utility filing fee	1804 920* 1804 920* Requesting publication of SIR prior to Examiner action	
1002 340 2002 170	Design filing fee	1805 1,840* 1805 1,840* Requesting publication of SIR after Examiner action	
1003 530 2003 265	Plant filing fee	1251 110 2251 55 Extension for reply within first month	
1004 770 2004 385	Reissue filing fee	1252 420 2252 210 Extension for reply within second month	
1005 160 2005 80	Provisional filing fee	1253 950 2253 475 Extension for reply within third month	
SUBTOTAL (1) (\$)		1254 1,480 2254 740 Extension for reply within fourth month	
0.00		1255 2,010 2255 1,005 Extension for reply within fifth month	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1401 330 2401 165 Notice of Appeal	
Total Claims <input type="text"/> ** = <input type="text"/> x <input type="text"/> = <input type="text"/>		1402 330 2402 165 Filing a brief in support of an appeal	
Independent Claims <input type="text"/> ** = <input type="text"/> x <input type="text"/> = <input type="text"/>		1403 290 2403 145 Request for oral hearing	
Multiple Dependent <input type="text"/> = <input type="text"/>		1451 1,510 1451 1,510 Petition to institute a public use proceeding	
Large Entity Small Entity		1452 110 2452 55 Petition to revive - unavoidable	
Fee Code Fee (\$)	Fee Code Fee (\$)	1453 1,330 2453 665 Petition to revive - unintentional	
1202 18 2202 9	Claims in excess of 20	1501 1,330 2501 665 Utility issue fee (or reissue)	
1201 86 2201 43	Independent claims in excess of 3	1502 480 2502 240 Design issue fee	
1203 290 2203 145	Multiple dependent claim, if not paid	1503 640 2503 320 Plant issue fee	
1204 86 2204 43	** Reissue independent claims over original patent	1460 130 1460 130 Petitions to the Commissioner	
1205 18 2205 9	** Reissue claims in excess of 20 and over original patent	1807 50 1807 50 Processing fee under 37 CFR 1.17(q)	
SUBTOTAL (2) (\$)		1806 180 1806 180 Submission of Information Disclosure Stmt	
0.00		8021 40 8021 40 Recording each patent assignment per property (times number of properties)	
**or number previously paid, if greater; For Reissues, see above		1809 770 2809 385 Filing a submission after final rejection (37 CFR 1.129(a))	
SUBMITTED BY		Other fee (specify)	
Name (Print/Type) S. Peter Ludwig	Registration No. (Attorney/Agent) 25,351	SUBTOTAL (3) (\$)	
Signature	Telephone (212) 527-7770	180.00	
	Date August 19, 2004		

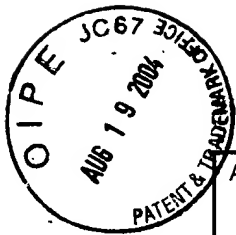
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Application No. (if known): 09/605,334

Attorney Docket No.: 06727/000H560-USO

## Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. \_\_\_\_\_ in an envelope addressed to:

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on August 19, 2004  
Date

*A. Stantini*

Signature

*A. Stantini*

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Supplemental IDS (Citation) by Applicant – PTO/SB-08 (1 page)  
Supplemental Information Disclosure Statement (2 pages)  
Fee Transmittal Form (1 page)  
Transmittal Form (1 page)  
Check No. **5839** for \$180.00  
Amendment in Response to Office Action of 5/20/04 (5 pages)  
Amendment Transmittal (1 page)  
Declaration of Inventors (2 pages)